	PATENT A	PPLICATION Effecti	Application or Docket Number  (0)013458  678-870(P10778)											
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE COF			OTHER THAN		
TOTAL CLAIMS			17		1.		1	RATE	FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS			/7 minus 20=		• 4			X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			3 minus 3 =		• 14			X42=		OR	X84=			
MU	LTIPLE DEPEN	DENT CLAIM PF	ESENT					+140=		OR	+280=			
* If the difference in column 1 is less than zero, enter *0" in column 2								TOTAL	• .	OR	TOTAL	740		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									ENTITY	OR	OTHER SMALL			
AMENDMENTA	., ,,	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUN PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
OME	Total	.17	Minus	-0	0	•	1	X\$ 9=		OR	X\$18=			
KEN	Independent	. 3	Minus		3	=	]	X42=		OR	X84≖			
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						j	+140=.		OR	+280=			
								TOTAL ADDIT. FEE		OR	TOTAL		ı	
(Column 1) (Column 2) (Column 3)										<b>J</b>	ADDIT. FEE		1	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER HOUSLY OFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 10 .	Minus	**	20	=		X\$ 9=	-	OR	X\$18=		İ	
	Independent	٠ 2	Minus	***	3	= \	1	X42=		ОЯ	X84z			
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280≈		ŀ	
·								TOTAL		OR	TOTAL ADDIT. FEE		1	
(Column 1) (Column 2) (Column 3)													1	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NU PREV	HEST MBER NOUSLY O FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		e .		X\$ 9=		ОЯ	X\$18=			
	Independent	• .	Minus	***		3.	_	X42=		OR	X84=		1	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						L	+140=		OR			1	
	* If the entry in column 1 is tess than the entry in column 2, write "o" in column 3.  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  * ADDIT. FEE  ** Tighest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ** To TAL.  ** ADDIT. FEE  ** To TAL.  ** To TAL.  ** To TAL.  ** ADDIT. FEE  ** To TAL.  ** ADDIT. FEE  ** To TAL.  *													